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# **DHEC Health Update**

Distributed via the South Carolina Health Alert Network May 2, 2008: 3:30pm

## Measles in the United States, January 1 – April 25, 2008

## **Summary**

The South Carolina Department of Health and Environmental Control (SC DHEC) would like to inform healthcare providers about the recent release of a report from the Centers for Disease Control and Prevention (CDC) providing information about recent measles cases and outbreaks in the United States. The following are excerpts from this MMWR, along with information regarding the diagnosis of measles and reporting requirements. A link can be found to the entire MMWR in the "Additional Sources of Information" section of this Health Update.

This information provides an update to the April 2, 2008 CDC Health Advisory on this topic available at the SC DHEC Health Alert Network Homepage: <a href="http://www.scdhec.gov/health/disease/han/notifications.htm">http://www.scdhec.gov/health/disease/han/notifications.htm</a>

## Measles Outbreaks, Update Information (excerpts from MMWR article)

During January 1--April 25, 2008, a total of 64 preliminary confirmed measles cases were reported from the following areas: New York City (22 cases), Arizona (15), California (12), Michigan and Wisconsin (four each), Hawaii (three), and Illinois, New York state, Pennsylvania, and Virginia (one each).

Patients ranged in age from 5 months to 71 years; 14 patients were aged <12 months, 18 were aged 1--4 years, 11 were aged 5--19 years, 18 were aged 20--49 years, and three were aged  $\geq$ 50 years, including one U.S. resident born before 1957.

Fifty-four (84%) of the 64 measles cases were importation associated:

- 10 (16%) of the importations (five in visitors to the United States and five in U.S. residents traveling abroad) were from Switzerland (three), Israel (three), Belgium (two), and India and Italy (one each),
- 29 (45%) cases were epidemiologically linked to importations,
- 15 (23%) cases had virologic evidence of importation, and,
- 10 (16%) cases were from unknown sources; however, all occurred in communities with importation-associated cases.

Sixty-three (98%) of the 64 patients were unvaccinated or had unknown or undocumented vaccination status, and one patient had documentation of receiving 2 doses of MMR vaccine. None of the five patients who were visitors to the United States had been vaccinated.

Among the 59 patients who were U.S. residents:

- 13 (22%) patients were aged <12 months and too young to be vaccinated routinely,
- 7 (12%) patients were children aged 12--15 months and had not yet received vaccination,
- 21 (35%) patients were children aged 16 months--19 years, including 14 (67%) who claimed exemptions because of religious or personal beliefs.

- 18 (31%) patients were aged ≥20 years, of these:
  - o 14 (78%) had unknown or undocumented vaccination status.
  - o 2 (11%) had claimed exemptions and acquired measles in Europe,
  - o 1 (5%) had evidence of immunity because of birth before 1957, and
  - 1 (5%) had documentation of receiving 2 doses of MMR vaccine.

Of the five U.S. residents with measles who were vaccine eligible and had traveled abroad, all were unvaccinated. One was a child aged 15 months who was not vaccinated before travel, and two were adults who were unvaccinated because of personal belief exemptions. For two adults, the reason for not being vaccinated was unknown.

#### Recommendations

The 2008 upsurge in measles cases serves as a reminder that measles is still imported into the United States and can result in outbreaks unless population immunity remains high through vaccination. These outbreaks illustrate the risk created by importation of disease into clusters of persons with low vaccination rates, both for unvaccinated and those who come into contact with them.

Healthcare providers should maintain vigilant for measles importations and have a high index of suspicion for measles in persons with a clinically compatible illness who have traveled abroad or who have been in contact with travelers. They should assess measles immunity in U.S. residents who travel abroad and vaccinate if necessary. Measles outbreaks are ongoing in Switzerland and Israel, and measles outbreaks are common throughout Europe.

Suspected measles cases should be reported immediately to the local health department. The local DHEC health department will assist healthcare providers in obtaining proper serologic and virologic specimens (serum and throat or nasopharyngeal swabs) for measles virus detection and genotyping and making sure that these specimens are sent to the DHEC Bureau of Laboratories for expeditious testing.

Information regarding transmission, measles case definition, infection control, preventing transmission in healthcare facilities and measles vaccination are present in the April 2, 2008 CDC Health Advisory "Measles Outbreaks in the United States", available at: http://www.scdhec.gov/health/disease/han/docs/CHA-Mea-1.pdf

## Additional sources for information including photographs of measles

- MMWR report on this topic was published May 1, 2008 and contains information on measles outbreaks from January 1 – April 25, 2008: <a href="http://www.cdc.gov/mmwR/preview/mmwrhtml/mm57e501a1.htm">http://www.cdc.gov/mmwR/preview/mmwrhtml/mm57e501a1.htm</a>
- Information about Measles, Vaccine information and additional references and resources can be found at: http://www.cdc.gov/vaccines/vpd-vac/measles/default.htm
- Immunization Action Coalition website, location for photos and additional information related to measles: www.vaccineinformation.org/measles/photos.asp
- Healthcare facilities with VisualDx accounts, provided by DHEC's Hospital Emergency Preparedness initiative, can also view images of measles and diagnostic tools for diagnosis via their link.

## **DHEC Contact Information for Reportable Diseases and Reporting Requirements**

Reporting of suspected or confirmed Measles cases is included in the current DHEC List of Reportable Conditions as an "Immediately Reportable by Phone" condition. Healthcare providers are required to

report suspected or confirmed cases to their Regional Public Health Offices, at the contact numbers listed below.

Federal HIPAA legislation allows disclosure of protected health information, without consent of the individual, to public health authorities to collect and receive such information for the purpose of preventing or controlling disease. (HIPAA 45 CFR §164.512).

## Regional Public Health Offices - 2008

Mail or call reports to the Epidemiology Office in each Public Health Region.

#### Region I

#### Anderson, Oconee

220 McGee Road Anderson, SC 29625 Phone: (864) 260-4358 Fax: (864) 260-5623

Nights / Weekends: 1-866-298-4442

# Abbeville, Edgefield, Greenwood, Laurens, McCormick, Saluda

1736 S. Main Street Greenwood, SC 29646 Phone: 1-888-218-5475 Fax: (864) 942-3690

Nights / Weekends: 1-800-420-1915

#### Region 2

### Greenville, Pickens

PO Box 2507 200 University Ridge Greenville, SC 29602-2507 Phone: (864) 282-4139 Fax: (864) 282-4373

Nights / Weekends: 1-800-993-1186

#### Cherokee, Spartanburg, Union

PO Box 4217 151 E. Wood Street Spartanburg, SC 29305-4217 Phone: (864) 596-2227, x- 210 Fax: (864) 596-3443

Nights / Weekends: 1-800-993-1186

#### Region 3

#### Chester, Lancaster, York

PO Box 817 1833 Pageland Highway Lancaster, SC 29721 Phone: (803) 286-9948 Fax: (803) 286-5418

Nights / Weekends: 1-866-867-3886

#### Region 3 (continued)

## Fairfield, Lexington, Newberry, Richland

2000 Hampton Street Columbia, SC 29204 Phone: (803) 576-2749 Fax: (803) 576-2993

Nights / Weekends: 1-888-554-9915

#### Region 4

### Clarendon, Kershaw, Lee, Sumter

PO Box 1628 105 North Magnolia Street Sumter, SC 29150 Phone: (803) 773-5511 Fax: (803) 775-9941

Nights/Weekends: 1-877-831-4647

# Chesterfield, Darlington, Dillon, Florence, Marlboro, Marion

145 E. Cheves Street Florence, SC 29506 Phone: (843) 661-4830 Fax: (843) 661-4859

Nights / Weekends: (843) 660-8145

# Region 5 Bamberg, Calhoun, Orangeburg

PO Box 1126 1550 Carolina Avenue Orangeburg, SC 29116 Phone: (803) 533-7199 Fax: (803) 533-7134

Nights / Weekends: (803) 954-8513

#### Aiken, Allendale, Barnwell

1680 Richland Avenue, W. Suite 40 Aiken, SC 29801 Phone: (803) 642-1618 Fax: (803) 643-8386

Nights / Weekends: (803) 827-8668 or

1-800-614-1519

#### Region 6

#### Georgetown, Horry, Williamsburg

1931 Industrial Park Road Conway, SC 29526-5482 Phone: (843) 915-8804 Fax: (843) 365-0085

Nights / Weekends: (843) 381-6710

#### Region 7

### Berkeley, Charleston, Dorchester

4050 Bridge View Drive, Suite 600 N. Charleston, SC 29405 Phone: (843) 746-3860 Fax: (843) 746-3851

Nights / Weekends: (843) 219-8470

#### Region 8

### Beaufort, Colleton, Hampton, Jasper

219 S. Lemacks Street Walterboro, SC 29488 Phone: (843) 549-1516, x-214

Fax: (843) 549-6845

Nights / Weekends: 1-800-614-4698

#### <u>DHEC Bureau of Disease Control</u> Division of Acute Disease Epidemiology

1751 Calhoun Street Box 101106 Columbia, SC 29211 Phone: (803) 898-0861 Fax: (803) 898-0897

Nights / Weekends: 1-888-847-0902



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Categories of Health Alert messages:

Health Alert conveys the highest level of importance; warrants immediate action or attention.

**Health Advisory** provides important information for a specific incident or situation; may not require immediate action. **Health Update** provides updated information regarding an incident or situation; unlikely to require immediate action.